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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identi	fy Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full n	ame		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.		Ann First name M.	First name
			Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		ames you have e last 8 years		
	Include you maiden na	ur married or mes.		
3.	your Socia number or Individual	federal	xxx-xx-4246	

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Case number (if known)

Debtor 1 Ann M. LaFrance

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ☐ I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years DBA Ann M. LaFrance Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 351 Merrimac St Park Forest, IL 60466 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Chapter 7

Chapter 11

Chapter 12

Case number (if known)

Chapter 32

Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 11

	choosing to the under	■ Ch	napter 7								
		☐ Ch	napter 11								
		☐ Ch	napter 12								
		☐ Ch	napter 13								
			·								
3.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mor order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check wat pre-printed address.								
				fee in installments. If you choose this opinstallments (Official Form 103A).	tion, sign and attach the Application for Individuals to Pay						
			but is not required applies to your fan	to, waive your fee, and may do so only if y illy size and you are unable to pay the fee	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out						
			the Application to	Have the Chapter 7 Filing Fee Waived (Off	icial Form 103B) and file it with your petition.						
).	Have you filed for bankruptcy within the	■ No.									
	last 8 years?	☐ Yes	S.								
			District	When	Case number						
			District	When	Case number						
			District	When	Case number						
0.	Are any bankruptcy	■ No									
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.								
			Debtor		Relationship to you						
			District	When	Case number, if known						
			Debtor		Relationship to you						
			District	When	Case number, if known						

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Ann M. LaFrance Document Page 4 of 62 Case number (if known)

Part	3: Report About Any Bu	sinesses	You Owr	as a Sole Propriet	tor					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.						
		☐ Yes.	☐ Yes. Name and location of business							
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any						
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code					
	it to this petition.		Chec	k the appropriate bo	x to describe your business:					
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))					
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))					
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))					
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))					
				None of the above						
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).							
	For a definition of small	■ No.	I am not filing under Chapter 11.							
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Code.							
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part	Poport if You Own or	Have Any	Hazarda	ous Proporty or An	y Property That Needs Immediate Attention					
	Do you own or have any		i iazai uc	ous i roperty of All	y Property That Needs infinediate Attention					
14.	property that poses or is alleged to pose a threat of imminent and	hat poses or is pose a threat Yes.		the hazard?						
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?						
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?						
					Number, Street, City, State & Zip Code					

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Debtor 1 Ann M. LaFrance

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 62 Case number (if known) Debtor 1 Ann M. LaFrance Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **25,001-50,000** you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ann M. LaFrance

Ann M. LaFrance Signature of Debtor 1

Executed on August 27, 2016

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Debtor 1 Ann M. LaFrance Document Page 7 of 62 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Andrew	C. Marzan ARDC	Date	August 27, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Andrew C	. Marzan ARDC		
Ledford, V	Vu & Borges, LLC		
105 W. Ma			
23rd Floor	•		
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
#6316313			
Par number 9 C	toto		

			THE TAGE OF OF									
ill in this information to identify your case:												
Debtor 1	Ann M. LaFrance											
	First Name	Middle Name	Last Name									
Debtor 2												
Spouse if, filing)	First Name	Middle Name	Last Name									
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS									
Case number _												

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	50,412.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	67,097.69
	1c. Copy line 63, Total of all property on Schedule A/B	\$	117,509.69
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	110,811.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	152,687.43
	Your total liabilities	\$	263,498.43
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,743.63
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,730.10
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 62 Case number (if known) Debtor 1 Ann M. LaFrance

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	0.075.40
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ 2,675.42

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	101,148.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	101,148.00

	(Case 16-27	′579	Doc 1		08/28/16 ument	Entered 08/28/16 Page 10 of 62	6 15:04:05	5 Desc	e Main
Fill	in this inf	ormation to ide	ntify yo	our case and tl						
Deb	otor 1	Ann M. I	_aFran		e Name		Last Name			
	otor 2 buse, if filing)	First Name		Middle	e Name		Last Name			
Uni	ted States	Bankruptcy Cou	rt for th	e: NORTHER	RN DISTE	RICT OF ILLIN	NOIS			
Cas	se number						-			Check if this is an amended filing
SC n ea hink nfor	chedu ch category cit fits best	. Be as complete nore space is nee	Pro	cribe items. List	le. If two	married people	in asset fits in more than one o are filing together, both are e e top of any additional pages,	qually respons	ible for supp	lying correct
Part	1: Descri	be Each Residen	ce, Build	ding, Land, or O	ther Real	Estate You Ow	n or Have an Interest In			
. D	o you own	or have any legal	or equit	able interest in a	any reside	ence, building,	land, or similar property?			
	No. Go to	Part 2.								
	Yes. Whe	re is the property?								
1.1					What	is the property	? Check all that apply			
	351 Me					Single-family h	nome			s or exemptions. Put
	Street addre	ess, if available, or oth	er descrip	tion		Duplex or mult	ti-unit building or cooperative			laims on Schedule D: Secured by Property.
	Park Fo		L (State	60466-0000 ZIP Code		Manufactured Land Investment pro	or mobile home	Current value entire property		Current value of the portion you own?
	•					Timeshare	btor's Residence	Describe the r	nature of you	r ownership interest
					Who I	nas an interest Debtor 1 only	in the property? Check one	a life estate), i		
	Cook					Debtor 2 only				
	County					Debtor 1 and [<u>-</u>			unity property
							the debtors and another bu wish to add about this item on number:	, such as local	tions)	
					p pu	.,				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$50,412.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Del	otor 1		se 16-27		Doc 1		08/28/16 cument		ntered ge 11 (of 62)	15:04 umber <i>(if l</i>		Des	sc Mair	1
			ıcks, tractors		utility vehi	icles moto	orcycles				0400		anown)			
] No	, u	iono, iradiore	,, эрогт	utility voi	iolos, mot	oroyolos									
	Yes															
3.′	1 Make Mode	· -	ord ocus			Who has a	an interest in t	the prop	erty? Chec	ck one		the amoun	t of any	secure	d claims on	nptions. Put Schedule D: by Property.
		_	2015 e mileage:	,	15788	☐ Debtor ☐ Debtor	2 only 1 and Debtor 2	-				Current va		he	Current v	value of the ou own?
	2015 with	For	d Focus 4D 38 miles in p		-	☐ Check	if this is comr					\$^	16,183	.00		\$16,183.00
E.			craft, motor l										S			
			r value of the ve attached f										.=>		\$1	6,183.00
Do 6. H	you ow	old go	Your Personal nave any lega ods and furn jor appliances	I or equ	itable inte	erest in any		wing ite	ems?					p	ortion you onot ded	lue of the u own? uct secured xemptions.
			M A D W S	rm Cha resser /asher,	air, Enter s, Desk, I Dryer, M are, Vacu	tainment Bookshel Iicrowave	ods and furn Center, Dir Ives, 4 Filin e, Pots/Pan king Chair,2	ning Ta ng Cab ns/Dish	able and inet, Ref es, Coff	d Chai frigera fee ma	irs, Be ator, S aker,	d, tove,		-		\$700.00
[Electroni Example □ No ■ Yes.	es: Tel ind	evisions and I luding cell pho					uipment,	compute	ers, prir	nters, sc	anners; n	nusic co	ollectio	ons; electro	onic devices
							tereo, CD P swering Mad							_		\$400.00
	⊒ No	es: An oth	tiques and figuer collections		0		ner artwork; b	ooks, pi	ctures, or	r other	art obje	cts; stam	p, coin,	or bas	seball card	collections;
	Yes.	Desci	_													4
			P	rofess	onal Tex	t Books								_		\$70.00

Official Form 106A/B

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Case number (if known) Document Debtor 1 Ann M. LaFrance 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... Treadmill, Weights, Camera, Hand Tools, Weedwacker and Leaf \$200.00 **Blower** 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$600.00 **Necessary Wearing Apparel** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Class Ring, Watch, Bracelet, Earrings, Necklaces and Costume \$100.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ΠNο Yes. Describe..... \$200.00 2 Dogs 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,270.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

Official Form 106A/B Schedule A/B: Property page 3

Cash

Yes.

\$30.00

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Case number (if known) Document

Debtor 1 Ann M. LaFrance 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 1st American Bank Business Checking \$500.00 17.1. Checking **Chase Checking Account** \$574.62 17.2. Checking **US Bank** \$300.00 Checking Save Deposit Box with Chase Bank Located in Lansing, IL. Contents include debtor's Other financial passport, birth certificate, Iraqi Currency with \$0.00 17.4. account no value. **Chase Bank** \$140.07 Savings 17.5. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: Dr. Ann M. LaFrance, Psy D, HSPP, LLC Operation of business **Assets Include:** -Printer -Computer 100 \$500.00 % -Miscellaneous Office Goods and Supply 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. □ No Yes. Give specific information about them Issuer name: \$600.00 **Ameriprise** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name:

Schedule A/B: Property

Thrivalent Financial

Official Form 106A/B

IRA

page 4

\$46,000.00

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Case number (if known) Ann M. LaFrance 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them... State of Of IL Psychological License \$0.00 \$0.00 State of IN Psychological License \$0.00 LLC Business Operation Licnese Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value.

Debtor 1

	Case 16-27579	Doc 1	Filed 08/28/16 Document	Entered 08/28/16 15:04:05 Page 15 of 62	Desc Main
Debtor 1	Ann M. LaFrance			Case number (if known)	
	Com	pany name:		Beneficiary:	Surrender or refund value:
	VGL	.I		Amy Hauenstein and Mary Beth Christofel	\$0.00
	AAF	RP Term Po	olicy		\$0.00
	_APA	A Term Poli	icy		\$0.00
	AAA	4			\$0.00
If you some	nterest in property that is on a rethe beneficiary of a living some has died. Give specific information	due you from g trust, expe	n someone who has die ct proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
Exam ■ No	as against third parties, when ples: Accidents, employments. Describe each claim			it or made a demand for payment s to sue	
■ No □ Yes.	. Describe each claim		·	g counterclaims of the debtor and rights to	set off claims
■ No	inancial assets you did not . Give specific information	already list			
				ny entries for pages you have attached	\$48,644.69
Part 5: De	escribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
■ No. G	own or have any legal or equi Go to Part 6. Go to line 38.	itable interest	in any business-related p	roperty?	
	escribe Any Farm- and Commo			n or Have an Interest In.	
■ No.	ou own or have any legal on b. Go to Part 7. es. Go to line 47.	r equitable in	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property You	Own or Have	an Interest in That You Dic	d Not List Above	
Exam	ou have other property of a nples: Season tickets, countr	ny kind you y club memb	did not already list? ership		
■ No □ Yes.	. Give specific information				
54. Add	the dollar value of all of yo	our entries f	rom Part 7. Write that n	number here	\$0.00

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Case number (if known)

Document Debtor 1 Ann M. LaFrance

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$50,412.00
56.	Part 2: Total vehicles, line 5	\$16,183.00		
57.	Part 3: Total personal and household items, line 15	\$2,270.00		
58.	Part 4: Total financial assets, line 36	\$48,644.69		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$67,097.69	Copy personal property total	\$67,097.69
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$117,509.69

Official Form 106A/B Schedule A/B: Property page 7 Case 16-27579 Doc 1 Filed 08/28/16 Entered 08/28/16 15:04:05 Desc Main Page 17 of 62 Document

Fill in this infor	rmation to identify your	case:			
Debtor 1	Ann M. LaFrance				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if	this
				amended	l filir

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the	Property	You	Claim	as I	Exempt	

_					
Pa	Itt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	351 Merrimac Park Forest, IL 60466 Cook County	\$50,412.00		\$15,000.00	735 ILCS 5/12-901
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2015 Ford Focus 15788 miles 2015 Ford Focus 4D sedan s with	\$16,183.00		\$2,400.00	735 ILCS 5/12-1001(c)
	15788 miles in possession of debtor Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	
	Misc used household goods and furnishings, including: Loveseat,	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
	Arm Chair, Entertainment Center, Dining Table and Chairs, Bed, Dressers, Desk, Bookshelves, 4 Filing Cabinet, Refrigerator, Stove,			100% of fair market value, up to any applicable statutory limit	

Player, iPod, Telephone, Printer, Fax Machine, Answering Machine and **Cell Phone**

Television, DVD Player, Stereo, CD

Pots/Pans/Dishes, Coffee maker, Si

Line from Schedule A/B: 7.1

\$400.00

100% of fair market value, up to

any applicable statutory limit

735 ILCS 5/12-1001(b)

Washer, Dryer, Microwave,

Line from Schedule A/B: 6.1

Entered 08/28/16 15:04:05 Case 16-27579 Doc 1 Filed 08/28/16 Desc Main Document Page 18 of 62 Debtor 1 Ann M. LaFrance Case number (if known) Current value of the Specific laws that allow exemption Brief description of the property and line on Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Professional Text Books** 735 ILCS 5/12-1001(a) \$70.00 \$70.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Treadmill, Weights, Camera, Hand 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Tools, Weedwacker and Leaf Blower Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit **Necessary Wearing Apparel** 735 ILCS 5/12-1001(a) \$600.00 \$600.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Class Ring, Watch, Bracelet, 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Earrings, Necklaces and Costume Jewelry 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 12.1 2 Dogs 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 13.1 П 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$30.00 \$30.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: 1st American Bank 735 ILCS 5/12-1001(b) \$500.00 \$500.00 **Business Checking** Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Chase Checking Account** 735 ILCS 5/12-1001(b) \$574.62 \$574.62 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking: US Bank 735 ILCS 5/12-1001(b) \$300.00 \$300.00

\$140.07

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$140.07

Line from Schedule A/B: 17.3

Savings: Chase Bank

Line from Schedule A/B: 17.5

735 ILCS 5/12-1001(b)

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btor 1 Ann	M. LaFrance	2004		Case number (if known)	
	ption of the property and line on	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Dr. Ann N	I. LaFrance, Psy D, HSPP,	\$500.00		\$500.00	735 ILCS 5/12-1001(d)
Assets In -Printer -Computer	er			100% of fair market value, up to any applicable statutory limit	
Supply 100 % ow					
Line from S	Schedule A/B: 19.1				
Ameripris	se Schedule A/B: 20.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Line from e	ionedule 74 B. 20.1			100% of fair market value, up to any applicable statutory limit	
	valent Financial	\$46,000.00		\$46,000.00	735 ILCS 5/12-1006
Line from Schedule A/B: 21.1	cneaule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
AARP Tei	rm Policy Schedule A/B: 31,2	\$0.00		\$0.00	215 ILCS 5/238
Line nom 3	onedule A.B. 31.2			100% of fair market value, up to any applicable statutory limit	
APA Tern		\$0.00		\$0.00	215 ILCS 5/238
Line from S	Schedule A/B: 31.3			100% of fair market value, up to any applicable statutory limit	
AAA	Schedule A/B: 31.4	\$0.00		\$0.00	215 ILCS 5/238
FILE HOLL 9	oneuale AVD. J 1.4			100% of fair market value, up to any applicable statutory limit	

☐ Yes

		Document	Page 20	of 62		
Fill in this informa	ation to identify you	ur case:				
Debtor 1	Ann M. LaFranc	20				
200101	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	cruptcy Court for the	: NORTHERN DISTRICT OF ILL	INOIS			
Case number					☐ Check	if this is an
()					_	ed filing
			-			ou imig
Official Form	106D					
Schedule D): Creditors	Who Have Claims	Secured	by Propert	V	12/15
				<u> </u>	<u> </u>	
		If two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors h	ave claims secured b	y your property?				
☐ No. Check the	his box and submit t	this form to the court with your other	schedules. Yo	ou have nothing else t	o report on this form.	
_	all of the information	•		· ·	•	
		below.				
	Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cre s a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's nam		Do not deduct the	that supports this	portion
2.1 Ford Motor	Credit	Describe the property that secures t	the claim:	value of collateral. \$18,979.00	claim \$16,183.00	If any \$2,796.00
Creditor's Name	Orodit	2015 Ford Focus 15788 mile		Ψ10,010.00	Ψ10,100.00	Ψ2,100.00
		2015 Ford Focus 4D sedan s	-			
Po Box 621	80	15000 miles in possession of				
Colorado S	prings, CO	As of the date you file, the claim is: apply.	Check all that			
80962		Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
		☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	mortgage or secu	ured		
Debtor 2 only		_				
Debtor 1 and Debt		☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the ☐ Check if this claim		☐ Judgment lien from a lawsuit	Lien on Veh	nicle PMSI		
community debt		Other (including a right to offset)	Lien on ver	IICIE F WISI		
-						
	Opened 05/15 Last					
	Active					
Date debt was incur		Last 4 digits of account num	ber 4162			
	<u> </u>					
2.2 Fst Amer B	k	Describe the property that secures	the claim:	\$10,120.00	\$50,412.00	\$0.00
Creditor's Name		351 Merrimac Park Forest, II	L 60466			
700 B	. .	Cook County				
700 Busse \ Elk Grove \		As of the date you file, the claim is:	Check all that			
60007	riiage, iL	apply. Contingent				
Number Street C	City, State & Zip Code	■ Unliquidated				
	,, 5.6.6 4 219 5006	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or seci	ured		
Debtor 2 only		car loan)				
Debtor 1 and Debt	tor 2 only	Statutory lien (such as tay lien, med	chanic's lian)			

 \square At least one of the debtors and another \square Judgment lien from a lawsuit

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Debtor 1 Ann M. La	France		(Case number (if know)		
First Name	Middle Na	ame Last Name		_		
☐ Check if this claim recommunity debt	elates to a	Other (including a right to offset)	Second Mo	rtgage		
Date debt was incurred	Opened 11/07 Last Active 7/14/16	Last 4 digits of account nun	nber <u>0955</u>			
2.3 Us Bank Home	e Mortgage	Describe the property that secures	the claim:	\$81,712.00	\$50,412.00	\$41,420.00
Creditor's Name		351 Merrimac Park Forest, Cook County	IL 60466		· ,	. ,
Attn: Bankrup Po Box 5229 Cincinnati, OH		As of the date you file, the claim is apply. Contingent	: Check all that			
Number, Street, City, S	State & Zip Code	Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as car loan)	s mortgage or secu	ured		
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the deb	otors and another	☐ Judgment lien from a lawsuit	·			
Check if this claim recommunity debt	elates to a	Other (including a right to offset)	Mortgage			
Date debt was incurred	Opened 10/13 Last Active 8/04/16	Last 4 digits of account nun	nber 5792			
	-	olumn A on this page. Write that nur		\$110,811.00	D	
Write that number her		the dollar value totals from all pages	5.	\$110,811.00	D	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0430 10 27070 - Do	Document Page	e 22 of 62	Descrivant
Fill in	this information to identify your case			
Debto	r 1 Ann M LaFrance			
20210	First Name	Middle Name Last Nam	ne	
		Middle Norse		
(Spouse	e ir, tiling) First Name	Middle Name Last Nam	ie .	
United	States Bankruptcy Court for the:	ORTHERN DISTRICT OF ILLINOIS		
Case	number			
(if known	n)			☐ Check if this is an
				amended filing
Offic	ial Form 106F/F			
		have Unsecured Claim	ıs	12/15
Debtor 2 (Spouse ff, filing)) First Name Middle Name Last Name Last Name				
eft. Atta	ach the Continuation Page to this page. I nd case number (if known). ——	f you have no information to report in a P		
_	, ,	amis agamst you?		
		Insecured Claims		
_		- ,	a a la a de da a	
		Submit this form to the court with your other	schedules.	
	Yes.			
un: tha	secured claim, list the creditor separately fo an one creditor holds a particular claim, list t	each claim. For each claim listed, identify w	hat type of claim it is. Do not list cla	aims already included in Part 1. If more
	· ·			Total claim
4.1	AAA Visa	Last 4 digits of account num	ber 7425	\$16,291.00
		When was the debt incurred?	·	
		As of the date you file, the cla	aim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	cured claim:	
	Check if this claim is for a commun	<u> </u>		
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agreement or divorce the	at you did not
	No	_ ' ' '	haring plans, and other similar debts	S
	■ No □ Yes	<u> </u>	and other similar debt	-
	□ res	Other. Specify		

Document Page 23 of 62 Debtor 1 Ann M. LaFrance Case number (if know) 4.2 **Bank Of America** Last 4 digits of account number 7128 \$0.00 Nonpriority Creditor's Name Nc4-105-03-14 Opened 05/06 Last Active When was the debt incurred? 11/20/07 Po Box 26012 Greensboro, NC 27410 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Real Estate Mortgage** Other. Specify 4.3 **Bank Of America** Last 4 digits of account number \$0.00 3321 Nonpriority Creditor's Name Opened 02/04 Last Active Nc4-105-03-14 Po Box 26012 When was the debt incurred? 11/20/07 Greensboro, NC 27410 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Real Estate Mortgage Other. Specify 4.4 **Capital One** Last 4 digits of account number 7902 \$1,119.00 Nonpriority Creditor's Name Po Box 30285 Opened 03/02 Last Active Po Box 62180 When was the debt incurred? 7/15/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

lacktriangledown Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 24 of 62 Document Debtor 1 Ann M. LaFrance Case number (if know) 4.5 **Capital One Auto Finance** Last 4 digits of account number 1001 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 03/12 Last Active When was the debt incurred? Po Box 30258 5/26/15 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Automobile ☐ Yes Other. Specify 4.6 **Care Credit** Last 4 digits of account number \$938.26 Nonpriority Creditor's Name P.O. Box 9001557 When was the debt incurred? Louisville, KY 40290-1557 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Chase Auto Finance** 0603 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/09 Last Active **National Bankruptcy Dept** 201 N Central Ave Ms Az1-1191 When was the debt incurred? 3/27/12 Phoenix, AZ 85004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

report as priority claims

■ Other. Specify Automobile

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 25 of 62 Debtor 1 Ann M. LaFrance Case number (if know) 4.8 **Chase Card Services** Last 4 digits of account number 5572 \$4.437.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 02/12 Last Active When was the debt incurred? 8/04/16 Po Box 15298 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Credit Card** ☐ Yes Other. Specify 4.9 **Chase Card Services** Last 4 digits of account number 6755 \$0.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 07/12 Last Active Po Box 15298 When was the debt incurred? 8/09/15 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Chase Card Services** 2727 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 07/07 Last Active Po Box 15298 When was the debt incurred? 3/07/08 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Page 26 of 62 Case number (if know) Document Debtor 1 Ann M. LaFrance

Citibank / Sears	Last 4 digits of account number	9488	\$0.00
Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Box 790040	When was the debt incurred?	Opened 11/27/06 Last Active 1/26/07	
Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other Specify Credit Card		
Citibank/The Home Denet		8495	\$0.00
Citibank/The Home Depot Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized	Last 4 digits of account number	Opened 11/14 Last Active	\$0.00
Bankruptcy Po Box 790040	When was the debt incurred?	5/19/16	
S Louis, MO 63129 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Charge Acc	count	
Citizens Bank	Last 4 digits of account number	9795	\$0.00
Nonpriority Creditor's Name Attn:Bankruptcy 443 Jefferson Blvd Ms Rjw-135	When was the debt incurred?	Opened 09/07 Last Active 11/16/13	
Warwick, RI 02886 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	······································	onosit all and apply	
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	o Ciaiin:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify Unsecured		

Document Page 27 of 62 Debtor 1 Ann M. LaFrance Case number (if know) 4.1 Citizens Bank 2914 \$0.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 12/04/09 Last Active 1000 Lafayette Blvd When was the debt incurred? 3/26/12 Bridgeport, CT 06604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Comenity Bank/Catherines 6484 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/05 Last Active Po Box 182125 When was the debt incurred? 11/06/15 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Charge Account** Other, Specify 4 1 Comenity Bank/Lane Bryant 5954 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 2/04/01 Last Active Po Box 182125 When was the debt incurred? 12/12/04 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

■ Other. Specify Charge Account

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 16-27579 Doc 1 Filed 08/28/16 Entered 08/28/16 15:04:05 Desc Main Document Page 28 of 62 Debtor 1 Ann M. LaFrance Case number (if know) 4.1 Global Netwk 1611 \$4,092.17 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/19/14 Last Active 5320 College Blvd When was the debt incurred? 7/15/16 Shawnee Missio, KS 66211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Check Credit Or Line Of Credit ☐ Yes 4.1 Kohls/Capital One 1106 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/11 Last Active Po Box 3120 When was the debt incurred? 6/01/16 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Charge Account** Other, Specify 4 1 Navient 0316 \$71,200.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/07 Last Active Attn: Claims Dept Po Box 9500 When was the debt incurred? 7/19/16 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only

☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational

Document Page 29 of 62 Debtor 1 Ann M. LaFrance Case number (if know) 4.2 0711 \$29,948.00 Navient Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Claims Dept Opened 09/07 Last Active Po Box 9500 When was the debt incurred? 7/19/16 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 \$0.00 **Navy Federal Cr Union** 0049 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/89 Last Active Po Box 3000 When was the debt incurred? 6/25/04 Merrifield, VA 22119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Prfrd Customer Account** 4251 \$2,248.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/14 Last Active Wells Fargo Retail Srvcs 800 Walnut St When was the debt incurred? 7/08/16 Des Moines, IA 50309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Charge Account

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 30 of 62 Case number (if know) Document Debtor 1 Ann M. LaFrance

Sallie Mae	Last 4 digits of account number	0004	\$0.00
Nonpriority Creditor's Name Attn: Navient Po Box 9500	When was the debt incurred?	Opened 08/01 Last Active 3/16/07	
Wilkes-Barr, PA 18873 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Educationa		
Synchrony Bank/ HH Gregg	Last 4 digits of account number	0740	\$0.00
Nonpriority Creditor's Name Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 05/00 Last Active 4/27/01	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/TJX	Last 4 digits of account number	1784	\$0.00
Nonpriority Creditor's Name Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 11/10 Last Active 6/06/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	on plans, and other similar debts	
■ INO	- Debte to pension of profit-shall	ig plane, and other similar debte	

Page 31 of 62 Case number (if know) Document Debtor 1 Ann M. LaFrance

Us Bank Home Mortgage Nonpriority Creditor's Name	Last 4 digits of account number	3806	\$0.
Attn: Bankruptcy		Opened 11/07 Last Active	
Po Box 5229	When was the debt incurred?	10/03/13	
Cincinnati, OH 45201		in Charle all that apply	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Real Estate	Mortgage	
Usaa Savings Bank	Last 4 digits of account number	5804	\$22,414.
Nonpriority Creditor's Name			• ,
Po Box 47504 San Antonio, TX 78265	When was the debt incurred?	Opened 07/92 Last Active 7/01/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Wells Fargo	Last 4 digits of account number	0102	\$0.
Nonpriority Creditor's Name Wells Fargo Bank Po Box 5185	When was the debt incurred?	Opened 9/28/07 Last Active 3/05/11	
Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	

Page 32 of 62 Case number (if know) Document Debtor 1 Ann M. LaFrance

4.2 9	Wells	s Fargo	Financial	Last 4 digits of account number	7374			\$0.00		
	Nonpriority Creditor's Name Attn: Bankruotcy Po Box 98784 Las Vegas, NV 89193		uotcy 84	Opened 3/25/14 Last Active 9/18/15		14 Last Active				
_	Numbe	er Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that appl	у			
_				☐ Contingent						
	☐ De	btor 2 on	v	☐ Unliquidated						
	_		d Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt				Type of NONPRIORITY unsecure	d claim:					
				☐ Student loans ☐ Obligations arising out of a separations	aration ac	areement or o	divorce that you did not			
	Is the	claim su	bject to offset?	report as priority claims	aration aç	greement or c	invoice that you did not			
	■ No			Debts to pension or profit-sharing	ng plans,	and other sin	nilar debts			
	☐ Yes	s		Other. Specify Charge Ac	count					
Part 3:	Lis	t Others	s to Be Notified About a Debt	That You Already Listed						
is tryin have m	ng to co	ollect fro	m you for a debt you owe to som	out your bankruptcy, for a debt that y leone else, list the original creditor ir /ou listed in Parts 1 or 2, list the add submit this page.	Parts 1	or 2, then lis	st the collection agency h	ere. Similarly, if you		
Name an				n which entry in Part 1 or Part 2 did you	_	ū				
Synchi Attn: B	•									
PO Bo			рері.		Part 2:	Creditors wit	h Nonpriority Unsecured Cla	aims		
Orlando, FL 32896				ast 4 digits of account number	N	OTICE OF	NI Y			
						01102 01	1			
Name an VISA		ess		· · · · · · · · · · · · · · · · · · ·	which entry in Part 1 or Part 2 did you list the original creditor? 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
POB 30		33630			Part 2:	Creditors wit	h Nonpriority Unsecured Cla	aims		
1711117	~, · L	55550	La	ast 4 digits of account number						
	he am			ecured Claim s. This information is for statistical r	eporting	j purposes o	nly. 28 U.S.C. §159. Add tl	ne amounts for each		
							Total Claim			
T,	otal	6a.	Domestic support obligations		6a.	\$	0.00			
cla	ims	Ch	Toyon and partain other debte :	very enve the marrowness	Ch	•	0.00			
from Pa	art 1	6b. 6c.	Taxes and certain other debts y	jury while you were intoxicated	6b. 6c.	\$ \$	0.00			
		6d.		cured claims. Write that amount here.	6d.	\$	0.00			
		6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00			
							Total Claim	_		
	otal	6f.	Student loans		6f.	\$	101,148.00			
from Pa		6g.		paration agreement or divorce that	C	¢	0.00			
		6h.	you did not report as priority cl Debts to pension or profit-share	aims ing plans, and other similar debts	6g. 6h.	\$ \$	0.00			
				nsecured claims. Write that amount	6i.	<u> </u>	51 530 43			

6j.

Total Nonpriority. Add lines 6f through 6i.

51,539.43

152,687.43

			THE TRUE DO OF OF	
Fill in this infor	mation to identify your	case:		
Debtor 1	Ann M. LaFrance			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Clair		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	· · · · · · · · · · · · · · · · · · ·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,		3. 4.0		

		Docume	ent Page 34 d	01.62	
Fill in this	information to identify your	case:			
Debtor 1	Ann M. LaFrance	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Nome	Last Name		
(Spouse II, III	ng) Filst Name	Middle Name			
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		lobtoro			40/45
Sched	lule H: Your Cod	eptors			12/15
	e and case number (if known you have any codebtors? (If	, ,		e as a codebtor.	
_	,	,	•		
■ No					
☐ Ye	S				
	hin the last 8 years, have yo na, California, Idaho, Louisiana				states and territories include
■ Na	. Go to line 3.				
_	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	s. Dia your opouco, former ope	aco, or logal oquivalent live	o with you at the time.		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt sthat apply:
3.1				☐ Schedule D. line	
3.1	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, lin	
				☐ Schedule G, line	
	Number Street	State	7IP Code	_	

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	in this information to identify your control of the Ann M. LaFr									
Del	otor 2	unoc			_					
	use, if filing)	NODTHEDN DIOTOR								
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	OF ILLINOIS		_					
	se number 		-					ed filing ent showin	g postpetition	
0	fficial Form 106l					<u></u>	// / MM / DD/ \	YYYY		
S	chedule I: Your Inc	ome				• • • • • • • • • • • • • • • • • • • •	, 55, .			12/15
sup spo	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse i de infori	is liv mati	ing with on abou	you, incl t your spe	ude inforrouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status*	☐ Not employed				☐ Not employed			
	employers.	Occupation	Psychologist							
	Include part-time, seasonal, or self-employed work.	Employer's name	Dr. Ann LaFran HSPP, LLC	ce, Psy	D.,					
	Occupation may include student or homemaker, if it applies.	Employer's address	351 Merrimac St Park Forest, IL 60466-6219			1				
		How long employed t	<u> </u>	achment	t for	Additio	nal Emplo	yment Inf	ormation	
Par	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. In	clude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for	that perso	on on the li	nes below. If	you need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	tor 1	Ann M. LaFrance	_	Case	number (if known)			
	Con	by line 4 here	4.	For	Debtor 1	For Debtornon-filing		
_				*-	0.00		14/74	
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	* \$	0.00	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$	0.00	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c. 8d. 8e. 8	\$ \$ \$ \$	2,675.76 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	
9.	8h.	Other monthly income. Specify: work all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8h.+ 9.	\$_ \$	3,743.63	* \$ \$	N/A	
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,743.63 + \$_	N/A	= \$	3,743.63
11.	Inclu othe	the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Interpret the second seco	depen	•	•	ed in <i>Schedul</i>	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					\$	3,743.63
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?				Combin	iea / income
	=	Yes. Explain: Debtor has suffered several instances of health of years. Debtor cannot commit to returning to a fu					kes in pa	ast 3

Official Form 106I Schedule I: Your Income page 2

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Debtor 1 Ann M. LaFrance Case	se number (if known)
-------------------------------	----------------------

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Psychologist	
Name of Employer	Newsome & Associates	
How long employed	3 year	
Address of Employer	200 Ravinia Place	
, ,	Orland Park, IL 60462	Principal on Contract. Not employer

Official Form 106I Schedule I: Your Income page 3

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Fill	in this information to identify y	our case:					
Deb					Check	c if this is:	
D-1-					_	An amended filing	
	ouse, if filing)						ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the	: NORTI	HERN DISTRICT OF ILLING	OIS	1	MM / DD / YYYY	
	e number nown)						
Of	fficial Form 106J				1		
	chedule J: Your	Exner	1989				12/15
Be a	as complete and accurate as ormation. If more space is ne nber (if known). Answer eve	s possible eded, atta ry questio	. If two married people ar				or supplying correct
1.	Is this a joint case?	enoia					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live	in a separ	ate household?				
	□ No	•	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						☐ Yes ☐ No
							□ No □ Yes
							□ No
							☐ Yes
							□ No
3.	Do your expenses include	_					☐ Yes
5.	expenses of people other t yourself and your depende	:han _	No Yes				
Est exp	Estimate Your Ongoi imate your expenses as of y enses as of a date after the olicable date.	our bankr	uptcy filing date unless y	ou are using this followed the lemental Schedule	orm as a sup	oplement in a Cha e box at the top o	opter 13 case to report f the form and fill in the
the	lude expenses paid for with value of such assistance an					Your exp	2000
(Off	ficial Form 106l.)					Tour exp	5113 6 3
4.	The rental or home owners payments and any rent for the		_	nclude first mortgag	e 4. \$		670.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner'	s, or renter	's insurance		4b. \$		0.00
	4c. Home maintenance, re	•			4c. \$		200.00
5	4d. Homeowner's associa			ma aquitu laana	4d. \$		0.00

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ebtor 1	Ann M. LaFrance	Case num	ber (if known)	
. Utilitie	s;			
	Electricity, heat, natural gas	6a.	\$	190.00
6b. \	Nater, sewer, garbage collection	6b.	\$	70.00
6c.	Felephone, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d. (Other. Specify: Cell Phone	6d.	\$	120.00
	and housekeeping supplies	7.	\$	300.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	100.00
	nal care products and services	10.		180.00
	al and dental expenses	11.		0.00
	portation. Include gas, maintenance, bus or train fare.		<u> </u>	0.00
	include car payments.	12.	\$	300.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	able contributions and religious donations	14.	\$	25.00
. Insura	<u> </u>			
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	275.00
15b. I	Health insurance	15b.	\$	0.00
15c. \	Vehicle insurance	15c.	·	65.00
	Other insurance. Specify: Professional Malpractice Insurance	15d.	·	75.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			7 0.00
Specify		16.	\$	0.00
	ment or lease payments:		<u> </u>	<u> </u>
	Car payments for Vehicle 1	17a.	\$	343.00
	Car payments for Vehicle 2	17b.		0.00
	Other Specific	17c.		0.00
	Other. Specify:	17d.	·	0.00
	onier. Specify. ayments of alimony, maintenance, and support that you did not report		Ψ	0.00
	ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106)		\$	0.00
	payments you make to support others who do not live with you.	01).	\$	0.00
Specify	• • • • • • • • • • • • • • • • • • • •	19.	<u> </u>	0.00
	real property expenses not included in lines 4 or 5 of this form or on S		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20a. 20e.	*	0.00
		206.	·	
Other:			· <u> </u>	100.00
	ge/Bank Fees		+\$	60.00
Pet C			+\$	300.00
Stude	nt Loan Repayment		+\$	80.00
Calcul	ate your monthly expenses			
	dd lines 4 through 21.		\$	3,730.16
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	3,730.10
		_	·	0.700.40
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	3,730.16
3. Calcul	ate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,743.63
	Copy your monthly expenses from line 22c above.	23b.		3,730.16
_55.		200.		0,100.10
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	13.47
	a expect an increase or decrease in your expenses within the year afte			-
For exa	mple, do you expect to finish paying for your car loan within the year or do you expect ation to the terms of your mortgage?			ease or decrease because of a
No.				

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THE III U	his information to identify you	r case:			
Debtor	1 Ann M. LaFranc	e			
	First Name	Middle Name	Last Name		
Debtor					
(Spouse if	f, filing) First Name	Middle Name	Last Name		
United 9	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case no					
(if known)					Check if this is an amended filing
Dec	al Form 106Dec laration About married people are filing togeth st file this form whenever you ng money or property by fraud or both. 18 U.S.C. §§ 152, 1341,	er, both are equally respon file bankruptcy schedules in connection with a bank	nsible for supplying corre	ect information. Making a false statement, co	
	Sign Below				
Di	d you pay or agree to pay som	neone who is NOT an attor	ney to help you fill out ba	inkruptcy forms?	
			, , ,		
-	No No		, ,,		
					etition Preparer's Notice, nature (Official Form 119)
Un	•	e that I have read the sum		Declaration, and Sign	
Und tha	Yes. Name of person der penalty of perjury, I declar they are true and correct.	e that I have read the sum	mary and schedules filed	Declaration, and Sign	
Und tha	Yes. Name of person der penalty of perjury, I declar	e that I have read the sumi		Declaration, and Sign	
Und tha	Yes. Name of person der penalty of perjury, I declar they are true and correct. /s/ Ann M. LaFrance	e that I have read the sum	mary and schedules filed X	Declaration, and Sign	

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Fill ir	this inform	ation to identify you	r case:			
Debto	or 1	Ann M. LaFranc	Δ			
2001	. ·	First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Office	a Glates Barr	Kruptcy Court for the.	NORTHERN DIOTRIOT C	TILLINGIO		
Case (if know	number				_	theck if this is an mended filing
∩ffi	cial For	m 107				
			Affairs for Indivic	luals Filing for B	ankruptcy	4/16
inforn	nation. If mo	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you	
		current marital statu		Lived Belole		
	J Married					
	Not marr	ied				
2. C	ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	:	
ı	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Mak	ke sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	2 Explain	the Sources of You	r Income			
F	ill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	-	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$39,365.02	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(be	oss income fore deductions and lusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)		☐ Wages, commissi bonuses, tips	ons,	\$52,120.00	☐ Wages, com bonuses, tips	missions,			
				Operating a busin	iess		☐ Operating a	business	
Foi (Ja	r the calend nuary 1 to	dar year be December	fore that: 31, 2014)	☐ Wages, commissi bonuses, tips	ions,	\$50,928.00	☐ Wages, com bonuses, tips	missions,	
				Operating a busin	iess		Operating a	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the that income is taxable pensions; rental income and you have income from each source some from each source source source source s	ole. Examples le; interest; di e that you red	of other income are a vidends; money collec- ceived together, list it c	limony; child supp ted from lawsuits; only once under De	royalties; an ebtor 1.	
	_ 100.	i ili ili tilo di	Julio.						
				Debtor 1	0	!	Debtor 2		O i
				Sources of income Describe below.	eac (be	ess income from th source fore deductions and lusions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
		1 of curre iled for ba	nt year until nkruptcy:	Veteran's disabilit	ty	\$8,542.96			
	r last calen nuary 1 to	dar year: December	31, 2015)	Veteran's disabilit	ty	\$12,814.44			
		dar year be December		Veteran's disabilit	ty	\$12,814.44			
Pai	rt 3: List	Certain Pa	vments You	Made Before You File	ed for Bankr	uptcv			
6.	·	Debtor 1's	or Debtor 2 ebtor 1 nor E	's debts primarily cor Debtor 2 has primarily personal, family, or ho	nsumer debts	s? lebts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			90 days befo	ore you filed for bankrup	ptcy, did you	pay any creditor a tota	l of \$6,425* or mor	e?	
		□ No.	Go to line 7	.					
		□ Yes	paid that cr not include	each creditor to whom y editor. Do not include p payments to an attornet t on 4/01/19 and every	payments for each	domestic support oblig kruptcy case.	ations, such as ch	ild support a	and alimony. Also, do
	-	•	•	•	•		or artor the date of	aajaotinon	
	■ Yes.			or both have primarily ore you filed for bankrup			I of \$600 or more?		
		□ No.	Go to line 7	.					
		■ Yes	List below e include pay	each creditor to whom yments for domestic sup this bankruptcy case.					
	Creditor'	s Name an	d Address	Dates of	payment	Total amount paid	Amount you still owe	Was this	payment for

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Debtor 1 Ann M. LaFrance

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	US Bank 25 E. Washington St. Chicago, IL 60602	6/1/2016 7/1/2016 8/1/2016 8/4/2016	\$2,980.00 \$0.00		■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other	
	Ford Motor Company 12600 S. Torrence Chicago, IL 60633	6/2016 7/2016 8/2016	\$990.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	rd payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	artners; relatives of any ge control, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	I partner; corporations gent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		yments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		perty repossessed, f	oreclosed, garnis	hed, attached	l, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property

Explain what happened

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Debtor 1	Ann M. LaFrance	Document	Page 44 of 62 Case number (if known)	2 000

11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.							
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount			
12.	Within 1 year before you filed for bankr court-appointed receiver, a custodian, o ■ No □ Yes		vas any of your property in the possession of an a er official?		efit of creditors, a			
Par	t 5: List Certain Gifts and Contributio	ns						
13.	Within 2 years before you filed for bank ☐ No ☐ Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more t	han \$600 per person	?			
	Gifts with a total value of more than \$6 per person Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value			
	Address: Julia Kingold Hauenstein 1119 South Williston Wheaton, IL 60187		Transfer of UTMA funds to niece turning of Majority Age	8/18/2016	\$2,208.01			
	Person's relationship to you: Niece							
14.	Within 2 years before you filed for bank ☐ No ☐ Yes. Fill in the details for each gift or		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value			
	Emmanuel Lutheran 4800 Sauk Trail Richton Park, IL 60471		Charitable Donations and Gifts made in the form of monies	Regular Monthly Contributions	\$600.00			
Par	t 6: List Certain Losses							
15.		uptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	■ No							
	☐ Yes. Fill in the details. Describe the property you lost and	Dosor	ibe any insurance coverage for the loss	Date of your	Value of property			
	how the loss occurred	Includ	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost			

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Case number (if known) Document Debtor 1 Ann M. LaFrance

Pa	tt 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?			erty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment
	Ledford, Wu & Borges, LLC 105 W. Madison 23rd Floor Chicago, IL 60602 notice@billbusters.com	\$1295.00 paid for Attorney Fe	e	2016	\$1,295.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list No Yes. Fill in the details.	or to make payments to your credito		r transfer any prope	erty to anyone who
	Person Who Was Paid Address	Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list	ness or financial affairs? as security (such as the granting of a			
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you				
	Ameriprise	Sale stocks and bonds	\$13,9171.	00	2/2014
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.	tion devices.)			
	Name of trust	Description and value of the prop	erty transferre	ed	Date Transfer was made

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Debtor 1 Ann M. LaFrance Document Page 40 01 02

Case number (if known)

Pai	rt 8: List of Certain Financial Accounts, In	struments, Safe Deposi	it Boxes, and S	torage Uni	ts		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated No Yes. Fill in the details.	or other financial accou	ınts; certificate	s of deposi	•	•	, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	cash, or other valuables?	year before you filed fo	r bankruptcy, a	ıny safe de	posit box or other depo	sitor	y for securities,
	No Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
	Chase Bank 3115 Ridge Road Lansing, IL 60438	deposit box Amy Hauenstei 1119 South Wil	Debtor has access to safe deposit box Amy Hauenstein 1119 South Williston Wheaton, IL 60187		Passport, Birth Certificate, and Iraqi Currency with No Value		□ No ■ Yes
22.	Have you stored property in a storage unit of	or place other than you	r home within	1 year befo	re you filed for bankrup	otcy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents		Do you still have it?
Pai	rt 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	រូ for,	or hold in trust
	■ No □ Yes Fill in the details						

Part 10: Give Details About Environmental Information

Address (Number, Street, City, State and ZIP Code)

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Describe the property

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Where is the property?

(Number, Street, City, State and ZIP

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Owner's Name

Value

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Debtor 1 Ann M. LaFrance

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environ No							
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	,					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any envir	ronmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Cor	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time				
	A member of a limited liability company	/ (LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	lacksquare No. None of the above applies. Go to Part	12.					
	■ Yes. Check all that apply above and fill in	the details below for each business					
	Address	escribe the nature of the business	Employer Identification number Do not include Social Security n				
		·	Dates business existed				
	Dr. Ann M. LaFrance, Psy D, HSPP, Pi	rivate Psychology Practice	EIN: Social Security Nu	mber			
	351 Merrimac St. Park Forest, IL 60466		From-To 10/2015 to Present				
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	de all financial			
	■ No						
	☐ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued					

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Case number (if known) Document

Debtor 1 Ann M. LaFrance

are tru	ue and correct. I understand that making	Financial Affairs and any attachments, and I declare under p a false statement, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ A	nn M. LaFrance		
Ann	M. LaFrance	Signature of Debtor 2	_
Sign	ature of Debtor 1		
Date	August 27, 2016	Date	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

☐ Yes

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Fill in this inform	mation to identify your	case:		
Debtor 1	Ann M. LaFrance			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Char	oter 7 12/15
	lividual filing under cha	-	l out this form if:	
you have least	ever is earlier, unless th	and the lease has n rithin 30 days after	ot expired. you file your bankruptcy petition or by the dat e time for cause. You must also send copies to	
	eople are filing togethe	r in a joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
For any credit information be	-	art 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
Identify the cr	editor and the property t	hat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's F name:	Ford Motor Credit		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	2015 Ford Focus 4	D sedan s	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's F name:	Fst Amer Bk		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	60466 Cook Coun		■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
Creditor's U	Js Bank Home Mortg	age	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property	351 Merrimac Park 60466 Cook Coun		■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1	Ann M. LaFrance	Case number (if known)	
securin	ng debt:		
	List Your Unexpired Personal Property Leas		
in the info	rmation below. Do not list real estate leases.	ted in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), f Unexpired leases are leases that are still in effect; the lease period has not yet ended e if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe	your unexpired personal property leases	Will the lease be assumed?	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Lessor's r		□ No	
Property:	on of leased	☐ Yes	
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicated that is subject to an unexpired lease.	I my intention about any property of my estate that secures a debt and any personal	
X /s/ A	Ann M. LaFrance	x	
Ann	n M. LaFrance ature of Debtor 1	Signature of Debtor 2	
Date	August 27, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-27579 Doc 1 Filed 08/28/16 Entered 08/28/16 15:04:05 Desc Main Document Page 55 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Ann M. LaFrance		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR D	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,295.00
	Prior to the filing of this statement I have received			1,295.00
	Balance Due		\$	0.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are men	abers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Exemption planning; preparation and filing and filing of motions pursuant to 11 USC 	ment of affairs and plan which rs and confirmation hearing, an ng of reaffirmation agreen	may be required; and any adjourned hea	arings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc from one chapter to another; and reopen amending a petition, list, schedule or sta creditors' meetings due to client's failure	chargeability actions or ar ing of a closed case. In a itement post-filing not due	ny other adversar Chapter 7 case: to Attorney's fau	jusicial lien avoidance, ılt, attending additional
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for i	representation of the debtor(s) in
_	August 27, 2016 Date	Is/ Andrew C. Mar Andrew C. Marza Signature of Attorne Ledford, Wu & Bo 105 W. Madison 23rd Floor Chicago, IL 60602 312-853-0200 Fa notice@billbuste	n ARDC #631631: y orges, LLC 2 x: 312-873-4693	3
		Name of law firm		

LEDFORD, WU & BORGES, LLC 105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

ATTORNEY RETENTION CONTRACT

FOR OFFICE USE (7)
Client No. 28676
Responsible attorney: A

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford & and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistent of the extent of the extent of any inconsistent of the extent of the ext	& Wi
2. Services and Fees: Client retains Attorney for the following services: □ Chapter 7 (prepetition service only): \$	mary nated cition orney lient's rs and to an
fact not known to Attorney in writing at the time of the initial consultation that complicates the case. NSF checks will be assessed a \$20 fe 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) EXCEPT: (1) adversary proceedings; (2) § redemption; (3) judicial lien avoidance; (4) post-discharge litigation; (5) appeals; (6) other: (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed	ee. § 722
4. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or other adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requestions and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify): Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time,	ested
may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed. 5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before it cur any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit car line of credit, or using an existing credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.	irring ard or
6. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ one or of the following outside counsel, at Attorney's expense, to work on this case: Kathleen W. Vaught, Kelly M. Johnson, Wayne J. Ske Christina Banyon, David Hall Carter, and	more alton,
7. Termination. Client may discharge Attorney at any time, subject to payment of any fcc owed for the services already rendered. Attorney terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee is bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, Client reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the fifee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.	for a for the will
X me l'ave fatille X Attorney signature:	96
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LEDFORD, WU & BORGES, LLC

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT

	L
FOR OFFICE USE	
Client No. 68676	
Interviewing Attorney:	-
Date: 8/4/2016	

THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant
- 4. Services: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;

	4	
c.	if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client options, informing Client what additional information Client needs to provide in order to enable Attorney provide such advice and information;	t's to
d.	where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and	
e.	to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client	
5. Fees (ch	neck one):	
A rela	consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-clientionship shall terminate at the conclusion of the interview	mt
Cli	ent agrees to pay \$ in nonrefundable consultation fee	
by Client a	t Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charge, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed of the parties' obligations and a breakdown of the costs.	أمم
information	ledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistant the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure in mandated by Section 527(b) of the Bankruptcy Code.	ce ad
	elatione x Date: 8,4,16	
Attorney Sig	gnature: 122 17 ARDC #: 6316313	

United States Bankruptcy CourtNorthern District of Illinois

	A M. I. a.E		C N	
In re	Ann M. LaFrance	Debtor(s)	Case No. Chapter 7	
	VE	ERIFICATION OF CREDITOR M.	ATRIX	
		Number of	Creditors:	34
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credite	ors is true and correct to	o the best of my
Date:	August 27, 2016	/s/ Ann M. LaFrance Ann M. LaFrance Signature of Debtor		

AAA Visa 910 96th Street Omaha, NE 68114

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One Po Box 30285 Po Box 62180 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130

Care Credit P.O. Box 9001557 Louisville, KY 40290-1557

Chase Auto Finance National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citizens Bank Attn:Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

Citizens Bank 1000 Lafayette Blvd Bridgeport, CT 06604

Comenity Bank/Catherines Po Box 182125 Columbus, OH 43218

Comenity Bank/Lane Bryant Po Box 182125 Columbus, OH 43218

Ford Motor Credit Po Box 62180 Colorado Springs, CO 80962

Fst Amer Bk 700 Busse Rd. Elk Grove Village, IL 60007

Global Netwk 5320 College Blvd Shawnee Missio, KS 66211 Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Navy Federal Cr Union Po Box 3000 Merrifield, VA 22119

Prfrd Customer Account Wells Fargo Retail Srvcs 800 Walnut St Des Moines, IA 50309

Sallie Mae Attn: Navient Po Box 9500 Wilkes-Barr, PA 18873

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896

Synchrony Bank/ HH Gregg Po Box 965064 Orlando, FL 32896

Synchrony Bank/TJX Po Box 965064 Orlando, FL 32896

Us Bank Home Mortgage Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201 Us Bank Home Mortgage Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201

Usaa Savings Bank Po Box 47504 San Antonio, TX 78265

VISA POB 30495 TAMPA, FL 33630

Wells Fargo Bank Po Box 5185 Sioux Falls, SD 57117

Wells Fargo Financial Attn: Bankruotcy Po Box 98784 Las Vegas, NV 89193